



Moving Expenses Support Form - 2026
For Expenses Reimbursed by Penn State
(Keep a copy for your records and submit)

Name: _____ PSU-ID: _____

Moving From: _____ Moving To: _____

Amount

A. Transportation of Household Goods and Personal Effects
(Moving van, truck rental, cars, supplies, tolls, etc.)

Amount paid by you _____

Amount paid by you to 3rd party _____

☐ **Check box if move is less than 50 miles further than current commute**

B. Travel & Lodging Expenses for moving from old to new home

Depart Date _____ Arrival Date _____

Lodging Exp: # of nights _____

Personal Auto Mileage _____ @ 20.5 cents per mile

Meals _____

Other form of transportation (please specify-air, car rental) _____

C. Storage Costs of Household & Personal Effects (up to 30 days)

from _____ to _____

D. Temporary Housing Expenses (up to 30 days)

from _____ to _____

E. Notes:

Total Paid to Employee

Total Paid to 3rd Party

By submission of this expense form, I certify that the expenses claimed as reimbursable on the form are a true and accurate accounting of the expenses incurred. By affixing my electronic signature, I agree to conduct business with the University electronically. Signatures and signed copies of this document transmitted by facsimile, email, or other means of electronic transmission shall constitute effective execution and be deemed to have the same legal force and effect as delivery of an original executed copy of this document for all purposes.

Signature _____ Date _____

Receipts are required for all reimbursed expenses, except personal mileage.